Docket: 2821

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Martinek et al.

Examiner:

Unassigned

Serial No:

Unassigned

Art Group Unit: Unassigned

Filed:

Concurrently herewith

Title:

Instrument Kit and Method For Performing Meniscal Repair

## APPLICATION TRANSMITTAL LETTER

Mail Stop: Patent Application Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

## Sir:

Transmitted herewith for filing is the [x] utility [ ] design patent application in this case including:

- This application is a [ ] Continuation; [ ] Divisional [ ] Continuation in Part of prior application
- 2. This application claims priority from PCT Application filed on which claims Serial No. priority from Provisional Application Serial No. filed on
- The application consisting of 25 pages (including 3. [x] specification, claims and abstract).
- 7 sheet(s) of drawings is enclosed. The drawings are: 4. [x]
  - [ ] formal; or
  - [x] informal; formal drawings will be submitted in due course.
- A signed declaration and power of attorney is enclosed. 5.
- A declaration and power of attorney is  $\underline{not}$  enclosed at this time since it  $\underline{has}$  not been executed by  $\underline{the}$  inventor(s). A 6. signed declaration and power of attorney will be submitted in due course.



- 7. [] An Assignment of the invention to \_\_\_\_\_ is enclosed. Please record the Assignment and return it to the undersigned.
- 8. [x] The Application filing fee is calculated below.

No. Filed	No. Extra*	Rate:	Fee
Basic Fee: Total Claims: 18 - 20 = Indep Claims: 3 - 3 =	0	x 18.00 x 86.00	\$ 770.00 \$ 0.00 \$ 0.00
[ ] Multiple Dependent Claims Presented	+ \$270.0	0	\$ <u>770.00</u>
		TOTAL:	\$ 770.00

- 9. [x] Please charge Deposit Account No. 21-0550 in the amount of \$ 770.00 which includes filing fee and recordation fee). TWO DUPLICATE COPIES OF THIS PAPER ARE ENCLOSED.
- 10. [x] The Commissioner is hereby authorized to charge any additional fees which may be required for this application, or credit any overpayment to Deposit Account No. 21-0550. TWO DUPLICATE COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

Date: February 9, 2004

1. 100

Mark Farber

Reg. No. 34,159

Attorney for Applicant

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# **CERTIFICATE OF EXPRESS MAILING**

Date of Deposit: <u>February 10, 2004</u>
I hereby certify that the following:

Certificate of Express Mailing Label No.: ET710030791US

- [x] This Certificate of Mailing
- [x] 25 Pages of Patent Application Including Pages of Abstract, Specification and Claims
- [x] 7 Pages of Informal Drawings
- [x] Application Transmittal Letter
- [x] Return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addresses" service under 37 CFR Section 1.10 on the Date of Deposit indicated above in an envelope addressed to Mail Stop: Patent Application, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Rebecca Lavman

Mark Farber C/O United States Surgical, a division of Tyco Healthcare Group LP 150 Glover Avenue Norwalk, CT 06856 203-845-1059